

Revision: HCFA-PM-95-4 (HSQB)
JUNE 1995

ATTACHMENT 4.35-H

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: NEVADA

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Enforcement of Compliance for Nursing Facilities

Additional Remedies: Describe the criteria (as required at '1919(h)(2)(A)) for applying the remedy. Include the enforcement category in which the remedy will be imposed (i.e., category 1, category 2, or category 3 as described at 42 CFR 488.408).

NONE

TN No. 95-08

Supersedes _____ Approval Date 12/11/95 Effective Date 7/1/95

TN No. N/A